

## Psychology Internship Program



### Greater Hartford Clinical Psychology Internship Consortium

VA Connecticut Healthcare System—Newington (116B)  
555 Willard Avenue  
Newington, CT 06111  
(860) 667-6760



UConn Health  
Department of Psychiatry  
Farmington, CT 06030-3910  
860-679-4680

Website: <https://www.va.gov/connecticut-health-care/work-with-us/internships-and-fellowships/>

**MATCH Number:1185**  
**Applications due: November 1**

### Accreditation Status

The pre-doctoral internship at the **Greater Hartford Clinical Psychology Internship Consortium** has been accredited for internship training by the Commission on Accreditation of the American Psychological Association. The next site visit will be during the academic year 2021.

*\*Questions related to the program's accredited status should be directed to the Commission on Accreditation:*

*Office of Program Consultation and Accreditation  
American Psychological Association  
750 1st Street, NE, Washington, DC 20002  
Phone: (202) 336-5979 / E-mail: [apaaccred@apa.org](mailto:apaaccred@apa.org)  
Web: [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)*

### Application & Selection Procedures

Students who meet the following eligibility criteria are invited to apply for internship with the Greater Hartford Clinical Psychology Internship Consortium. **Eligibility criteria are set by the Department of Veterans Affairs (VA).**

*In addition to the Eligibility Requirements listed on the VA psychology training homepage (<http://www.psychologytraining.va.gov/eligibility.asp>) and copied below, applicants for our pre-doctoral internship must meet several additional requirements:*

Eligibility Requirements for all VA/Consortium Trainees:

The Department of Veterans Affairs (VA) adheres to all Equal Employment Opportunity and Affirmative Action policies. As a Veterans Health Administration (VHA) Health Professions Trainee (HPT), you will receive a Federal appointment, and the following requirements will apply prior to that appointment:

1. **U.S. Citizenship.** HPTs who receive a direct stipend (pay) must be U.S. citizens. Trainees who are not VA paid (without compensation-WOC) and who are not U.S. citizens may be appointed and must provide current immigrant, non-immigrant or exchange visitor documents.

*This document contains links to sites external to Department of Veterans Affairs.  
VA does not endorse and is not responsible for the content of the external linked websites.*

August 20, 2022

2. **U.S. Social Security Number.** All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the VA.
3. **Selective Service Registration.** Male applicants born after 12/31/1959 must have registered for the Selective Service by age 26 to be eligible for U.S. government employment, including selection as a paid or WOC VA trainee. For additional information about the Selective Service System, and to register or to check your registration status visit <https://www.sss.gov/>. Anyone who was required to register, but did not register before the age of 26, will need to apply for a Status Information Letter (SIL) and request a waiver. Waivers are rare and requests will be reviewed on a case by case basis by the VA Office of Human Resources Management. This process can take up to six months for a verdict.
4. **Fingerprint Screening and Background Investigation.** All HPTs will be fingerprinted and undergo screenings and background investigations. Additional details about the required background checks can be found at the following website: <http://www.archives.gov/federal-register/codification/executive-order/10450.html>.
5. **Drug Testing.** Per Executive Order 12564, the VA strives to be a Drug-Free Workplace. HPTs are not drug-tested prior to appointment, however are subject to random drug testing throughout the entire VA appointment period. You will be asked to sign an acknowledgement form stating you are aware of this practice. See item 8 below.
6. **Affiliation Agreement.** To ensure shared responsibility between an academic program and the VA there must be a current and fully executed Academic Affiliation Agreement on file with the VHA Office of Academic Affiliations (OAA). The affiliation agreement delineates the duties of VA and the affiliated institution. Most APA-accredited doctoral programs have an agreement on file. More information about this document can be found at <https://www.va.gov/oa/agreements.asp> (see section on psychology internships). Post-degree programs typically will not have an affiliation agreement, as the HPT is no longer enrolled in an academic program and the program is VA sponsored.
7. **TQCVL.** To streamline on-boarding of HPTs, VHA Office of Academic Affiliations requires completion of a Trainee Qualifications and Credentials Verification Letter (TQCVL). An Educational Official at the Affiliate must complete and sign this letter. For post-graduate programs where an affiliate is not the program sponsor, this process must be completed by the VA Training Director. Your VA appointment cannot happen until the TQCVL is submitted and signed by senior leadership from the VA facility. For more information about this document, please visit <https://www.va.gov/OAA/TQCVL.asp>
  - a. **Health Requirements.** Among other things, the TQCVL confirms that you, the trainee, are fit to perform the essential functions (physical and mental) of the training program and are immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects you, other employees and patients while working in a healthcare facility. Required are annual tuberculosis screening, Hepatitis B vaccine as well as annual influenza vaccine. *Declinations are EXTREMELY rare.* If you decline the flu vaccine you will be required to wear a mask while in patient care areas of the VA. In addition, all Psychology Predoctoral Interns and Postdoctoral Residents, like all VA personnel and trainees in VA facilities, must be fully vaccinated against COVID-19 or have an exemption filed (medical or religious) with the Designated Educational Officer.
  - b. **Primary source verification of all prior education and training** is certified via the TQCVL. Training and Program Directors will be contacting the appropriate institutions to ensure you have the appropriate qualifications and credentials as required by the admission criteria of the training program in which you are enrolled.
8. **Additional On-boarding Forms.** Additional pre-employment forms include the Application for Health Professions Trainees (VA 10-2850D) and the Declaration for Federal Employment (OF

August 20, 2022

306). These documents and others are available online for review at <https://www.va.gov/oa/app-forms.asp>. Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.

9. **Proof of Identity per VA.** VA on-boarding requires presentation of two source documents (IDs). Documents must be unexpired and names on both documents must match. For more information visit: [https://www.oit.va.gov/programs/piv/\\_media/docs/IDMatrix.pdf](https://www.oit.va.gov/programs/piv/_media/docs/IDMatrix.pdf)

Additional information regarding eligibility requirements for appointment as a psychology HPT can be found at the end of this brochure.

#### **Additional information regarding eligibility requirements (with hyperlinks)**

- Trainees receive term employee appointments and must meet eligibility requirements for appointment as outlined in VA Handbook 5005 Staffing, Part II, Section B. Appointment Requirements and Determinations. [https://www.va.gov/vapubs/viewPublication.asp?Pub\\_ID=646&FType=2](https://www.va.gov/vapubs/viewPublication.asp?Pub_ID=646&FType=2)
- Selective Service website where the requirements, benefits and penalties of registering vs. not registering are outlined: <https://www.sss.gov/Registration/Why-Register/Benefits-and-Penalties>

#### **Additional information specific suitability information from Title 5 (referenced in VHA Handbook 5005 – hyperlinks included):**

**(b) Specific factors.** In determining whether a person is suitable for Federal employment, only the following factors will be considered a basis for finding a person unsuitable and taking a suitability action:

- (1) Misconduct or negligence in employment;
- (2) Criminal or dishonest conduct;
- (3) Material, intentional false statement, or deception or fraud in examination or appointment;
- (4) Refusal to furnish testimony as required by § 5.4 of this chapter;
- (5) Alcohol abuse, without evidence of substantial rehabilitation, of a nature and duration that suggests that the applicant or appointee would be prevented from performing the duties of the position in question, or would constitute a direct threat to the property or safety of the applicant or appointee or others;
- (6) Illegal use of narcotics, drugs, or other controlled substances without evidence of substantial rehabilitation;
- (7) Knowing and willful engagement in acts or activities designed to overthrow the U.S. Government by force; and
- (8) Any statutory or regulatory bar which prevents the lawful employment of the person involved in the position in question.

**(c) Additional considerations.** OPM and agencies must consider any of the following additional considerations to the extent OPM or the relevant agency, in its sole discretion, deems any of them pertinent to the individual case:

- (1) The nature of the position for which the person is applying or in which the person is employed;
- (2) The nature and seriousness of the conduct;
- (3) The circumstances surrounding the conduct;
- (4) The recency of the conduct;
- (5) The age of the person involved at the time of the conduct;
- (6) Contributing societal conditions; and
- (7) The absence or presence of rehabilitation or efforts toward rehabilitation.

**Students interested in applying for the internship program are directed to [www.appic.org](http://www.appic.org) to complete and submit the AAPI**

August 20, 2022

All required application materials must be submitted by **November 1, 2020** to the attention of:

**Greater Hartford Clinical Psychology Internship Consortium**

c/o Gary Bryson, PsyD (116B)

VA Connecticut Healthcare System--Newington

555 Willard Avenue

Newington, CT 06111

(860) 594-6348 or e-mail: [gary.bryson@va.gov](mailto:gary.bryson@va.gov)

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**Internship Program Tables Updated August 20, 2022**

<b>Internship Program Admissions</b>			
<b>Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:</b>			
Applicants must come from APA approved clinical or counselling psychology programs. The average number of intervention hours for recent classes has been substantially higher than our minimums. The Consortium offers an intensive, generalist, clinical internship designed to provide a flexible, varied, and balanced educational experience within the context of a scientist-practitioner model of training. Its objectives include providing a comprehensive set of learning experiences in all major areas of clinical functioning arranged around three, four- month major rotations. Clinical skills and professional growth develop through substantial contact with a diverse supervisory faculty, varied clinical experiences and collegial stimulation via the development of a cohesive and active peer group of interns who have regular and meaningful interaction. The hallmark of the program is variety and flexibility, so as to meet the individual needs and interests of each intern.			
<b>Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:</b>			
Total Direct Contact Intervention Hours	<b>N</b>	<b>Y XX</b>	Amount: 600 Hours
Total Direct Contact Assessment Hours	<b>N</b>	<b>Y XX</b>	Amount: 50 Hours
<b>Describe any other required minimum criteria used to screen applicants:</b>			
<ul style="list-style-type: none"><li>• Comprehensive Exams passed by the application deadline</li><li>• Dissertation Proposal Approved by the start of internship</li></ul>			
<i>The Consortium is truly a national training program. In the last decade interns have come from: University of Albany, Binghamton University, Boston University, University of California-San Diego, University of Central Florida, University of Cincinnati, University of Connecticut, University of Denver, Fordham University, University of Hartford, University of Hawaii, Hofstra University, University of Houston, Long Island University-C.W. Post, Long Island University-Brooklyn, LaSalle University, University of Maine, University of Massachusetts, Massachusetts School of Professional Psychology, New York University, Nova Southeastern University, University of Rhode Island, Rutgers University, University of South Florida, University of Southern California, Seton Hall University, Stony Brook University, Virginia Tech, University of Washington, University of West Virginia, University of Vermont, Wheaton College, and Yale University.</i>			

August 20, 2022

**Program  
Disclosures**

As articulated in Standard I.B.2, programs may have “admission and employment policies that directly relate to affiliation or purpose” that may be faith-based or secular in nature. However, such policies and practices must be disclosed to the public. Therefore, programs are asked to respond to the following questions:

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution’s affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values.	<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
<p>If yes, provide website link (or content from brochure) where this specific information is presented:</p> <p><a href="https://www.va.gov/vapubs/viewPublication.asp?Pub_ID=646&amp;FType=2">https://www.va.gov/vapubs/viewPublication.asp?Pub_ID=646&amp;FType=2</a></p>	

## Financial and other support for upcoming training year (2023-24)

### Benefits table for the 4 interns paid through VA CT

Annual Stipend/Salary for Full-time Interns	\$29,368	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	Yes X	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes X	No
Coverage of family member(s) available?	Yes X	No
Coverage of legally married partner available?	Yes X	No
Coverage of domestic partner available?	Yes X	No
Hours of Annual Paid Personal Time Off (Vacation)	Approximately 100	
Hours of Annual Paid Sick Leave	Approximately 100	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes X	No
Other Benefits (please describe):		

### Benefits table for the 1 intern paid through UConn Health

Annual Stipend/Salary for Full-time Interns*	\$33,575.76	
Annual Stipend/Salary for Half-time Interns	n/a	
Program provides access to medical insurance for intern?	Yes X	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes X	No
Coverage of family member(s) available?	Yes X	No
Coverage of legally married partner available?	Yes X	No
Coverage of domestic partner available?	Yes X	No
Hours of Annual Leave Paid Personal Time Off	0	
Hours of Annual Paid Sick Leave	0	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes X	No
*The salary mechanism for the UCH intern does not allow for paid time off or paid sick days. For that reason the UCH salary includes pay for 13 days of vacation, 13 days of sick time and 10 Federal Holidays, as received by VA-paid interns, plus 1.25 days for FMLA		

## Initial Post-Internship Positions

Interns graduating from the Consortium typically have had excellent success at attaining post-doctoral training opportunities in their chosen areas. Past interns have gone on to Post-Internship experiences in this and other VA Hospitals, university medical centers, private practice, community mental health centers and industry. Recent graduates have gone on to do their postdoctoral fellowships in such institutions as: Hartford Hospital/ Institute of Living, Harvard/Deaconess Consortium, Columbia University Counseling Center, VA Providence, VA Connecticut, Yale, Hillside Hospital University and Northwell Health System, as well as a host of private practice post doc and employment experiences..

	<b>2018-21</b>	
Total # of interns who were in the 3 cohorts	14	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Academic teaching	0	0
Community mental health center	0	0
Consortium	0	0
University Counseling Center	1	0
Hospital/Medical Center	1	0
Veterans Affairs Health Care System	2	0
Psychiatric facility	3	0
Correctional facility	0	0
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	3	2
Other	1	1

## Internship Setting

The Greater Hartford Clinical Psychology Internship Consortium (Consortium) represents the collaborative effort of the VA Connecticut Healthcare System-Newington Campus (VA) and UConn Health (UCH) to share resources and faculty for the purpose of providing a diversified educational program.

The Consortium faculty is large and diverse, representing a variety of doctoral programs and encompassing a breadth of clinical, research, professional, and programmatic interests. All share a commitment to quality patient care, to learning and research, and to excellence in teaching.

Responsibility for the internship program resides in the Consortium Training Committee, composed of the Consortium Director, a Director of Training from UCH, and an intern representative. The Committee is charged with overall administration of the program, including formulation of training and policy objectives, and monitoring ongoing programs and activities.

The Consortium offers one-year, full-time internships in clinical psychology beginning July 1, and ending June 30 of the following year. The Consortium currently offers five full-time stipends. The base stipend (set by the VA) is \$ 29,368 annually and \$33,274 for UCH intern. Health and life insurance benefits are available. Paid Annual leave, sick leave are available for the VA interns only (hence why the UCH intern gets a larger stipend (stipend is larger by the amount of paid leave for the VA interns).

August 20, 2022

The internship is designed to meet the Standards of Accreditation (SOA-2017) promulgated by the American Psychological Association for Health Service Psychology, as well as specific needs of the individual interns. All interns have access to all training sites within the Consortium in a variety of ways:

- Through rotations
- Through supervision
- Through a year-long series of formal weekly seminars.

### ***Training Model and Program Philosophy***

The Consortium offers a general clinical internship designed to provide a flexible, varied, and balanced educational experience within the context of a scientist-practitioner model of training. Its objectives include:

- An intensive set of learning experiences in all major areas of clinical functioning
- Professional growth through contact with a diverse supervisory faculty, and
- Collegial stimulation via the development of a cohesive and active peer group of interns who have regular and meaningful interaction.

The program is flexible so as to meet the individual needs and interests of each intern. This flexibility is made possible by:

- The diversity of available supervision
- The diversity of available rotation settings
- A rich program of shared clinical and seminar experiences, and
- The fact that the stipends are not dependent upon the amount or nature of clinical workload.

The Consortium holds that the role of the psychology intern is that of an emerging professional. Interns are expected to gradually assume and develop unique roles as independent professionals as they become proficient in the clinical skills common to all doctoral-level professional psychologists. As a training program, we highly value the role of the supervisory relationship in facilitating intern growth and development across clinical, academic, and professional domains. We work to create a positive culture in which interns feel supported and valued, while also challenged to grow professionally. Interns are ultimately expected to exhibit satisfactory levels of competency within the broad areas outlined in the APA's Standards of Accreditation (SOA) 2017. These include developing competencies in: ethics, individual and cultural diversity, psychological evaluation and treatment planning, effective use of research, psychotherapy, consultation, developing a professional identity, developing professional communication skills, documenting clinical notes, and developing an understanding of supervision and consultation. Allocation of time in these areas may vary with skills and interests, but all interns should be able to perform the following functions satisfactorily by the end of the internship:

**Psychological evaluation, diagnosis and conceptualization --** Interns will be able to:

- Effectively utilize interview findings, clinical observations and clinical judgment in identifying one or more diagnoses and in developing treatment plans
- Appropriately support the above with symptom- or diagnostic-specific test instruments
- Correctly interpret evaluation data and render accurate inferences
- Effectively communicate evaluation findings via written reports and progress notes

**Brief and long-term individual and group treatment --** Interns will be able to:

- Conceptualize presenting problems and set appropriate treatment goals
- Establish effective therapeutic alliances



August 20, 2022

- Select, justify, and apply different treatment interventions in the individual and/or group context
- Articulate an understanding of the overall therapy process
- Articulate an understanding of the interactive nature of the therapeutic relationship

**Professional development -- Interns will be able:**

- To be accountable, dependable, responsible, and shows initiative
- To appropriately manage boundaries in all professional contexts
- To be concerned for the welfare of others and their general well-being
- To conduct oneself and dress in a professional manner

**Consultation to other disciplines regarding psychological issues -- Interns will be able to:**

- Develop and maintain effective professional relationships with a variety of other professional and allied health disciplines
- Work with individuals of other professions to maintain a climate of mutual respect and shared values in regards to inter-professional practice. This includes appreciation and integration of contributions and perspectives of other professions.

**Diversity and cultural competency — interns will be able to:**

- Understand how their own personal/cultural history, attitudes and biases interact with people who are different from themselves
- Demonstrate sensitivity and be responsive to issues of individual and cultural diversity
- Integrates awareness and knowledge (including current theoretical and empirical knowledge) of individual and cultural diversity *across the full range of professional roles* (e.g., assessment, intervention, research, professionalism, communication, etc.).

The Consortium faculty, through their active participation in clinical, program development, consultation, teaching, research, continuing education, professional development and administrative activities, will strive to impart to the interns attitudes essential for life-long learning, scholarly inquiry, and professional problem solving, in the context of an evolving healthcare arena and an evolving body of scientific and professional knowledge.

One core experience of the program is substantial individual supervision. Interns will receive more than four hours of supervision weekly, including both individual and group supervision. Supervisors from a wide variety of theoretical orientations are available, both as rotation supervisors and as auxiliary collaborators. The structure and variety of services available throughout the Consortium, and psychology's intrinsic role in these services, also provide ample opportunity for adjunctive supervision utilizing the expertise of a wide variety of professionals across the full range of clinical activities. Clinical experiences are enriched with seminars, colloquia, and VA-sponsored evidence-based psychotherapy training.

Interns are strongly encouraged to devote some time to the completion of their dissertations, or if finished with the dissertation, to consider participation in ongoing research programs within the Consortium. The Consortium internship aims to develop professionals with a thorough, yet flexible knowledge of professional psychology, and foster critical thinking skills, curiosity and self-reflection.

The Consortium's clinical training affords the intern exposure to a culturally and individually diverse patient population. Geographically, the Hartford, Connecticut area has been identified as a "representative area" which means that the demographic composition is very similar to the demography of the country as a whole. The patients served by the Consortium institutions are characterized by diversity along a variety of dimensions:

August 20, 2022

- Race
- Ethnicity
- Language
- Age
- Gender
- Education
- Occupation
- Marital status
- Economic
- Religion
- Cultural
- Sexual orientation
- Health
- Functional status
- Severity of Mental Health Issues

Each intern also has the opportunity to work with richly diverse clients and staff at the Consortium institutions. Consortium faculty address issues of cultural and individual differences and diversity in their teaching and supervision. Developing cultural competence in healthcare settings is a priority area in the internship.

### ***Program Structure and Training Experiences***

Each intern is assisted in developing a personalized training plan that incorporates areas of intern interest, areas in which interns feel they need additional training, and areas in which interns may have had no previous experience, but would like an initial exposure. The Consortium Director and the interns decide on initial rotations in the months prior to beginning the training year. During the first week of training, the training opportunities at each institution are reviewed. Interns are encouraged to view the internship from a consortium perspective, with an emphasis on the unique advantages of seeking training opportunities at each institution at some point during the training year.

Following this orientation, the interns plan the remainder of their training year within the following guidelines:

- Interns will complete three, four-month major rotations chosen from the rotations offered at the VA and UCH.
- Interns may choose to participate in available elective minor rotations of up to 8 hours per week at either the VA or UCH. Minor rotations can range from four months (at the VA) to six months at UCH.
- Additionally, a long term, individual psychotherapy caseload of two to three VA clients is also assigned to interns and carried through the year across Consortium institutions and rotations. Engaging in long-term psychotherapy affords the intern the opportunity to gain a more complete appreciation for the contribution of therapist variables, patient variables and process variables to therapy outcome.
- The proposed training schedules are submitted to the Consortium Training Committee for review to ensure that the interns will have a balanced experience as well as the opportunity to have experiences that build on their particular interests.
- In order to address safety concerns during the COVID Pandemic, interns in the past two training years were trained to use tele-mental health resources to provide services, participate in supervision and attend formal didactics. It is likely, but not guaranteed, that during the upcoming training year some provision of services or formal didactics will be delivered via teleconference.

## Consortium Institutions and Training Opportunities

### 1. VA Connecticut Healthcare System, Newington Campus

#### Four Month Major Rotations:

**Clinical Health Psychology (CHP) Rotation.** Interns in this rotation will be involve a broad spectrum of health psychology training opportunities across four main areas: Smoking Cessation Treatment Program, the Primary Care – Mental Health Integration, Chronic Pain Clinic and the Insomnia Clinic. The Smoking Cessation Treatment Program assists smokers requiring intensive behavioral and pharmacological treatment for cessation attempts. Interns will conduct rapid assessments to determine appropriate clinical paths. Interns will deliver treatment in brief intervention, more intensive individual therapy or group formats. Interns will learn to treat nicotine dependence in patients with co-occurring substance abuse and psychiatric problems that are often refractory to treatment. Interns will learn current theories and clinical decision pathways, become knowledgeable with clinical practice guidelines, conduct assessments using motivational interviewing techniques, direct groups, and conduct follow-up treatments. Within the Chronic Pain Clinic the intern will learn Pain Focused Cognitive Behavioral Therapy using the nationally accepted protocol. The Insomnia Clinic provides experience in CBT for Insomnia and includes both group and individual therapy following the nationally accepted protocol. The Primary Care - Mental Health Integration clinic will involve being embedded in primary care being first line provider to patients who are new to mental health. Trainees are taught to develop proficiency in determining the appropriate level of care for patients as well as following select patients for short-term psychotherapy in primary care. Training in clinical health psychology for geriatric patients will also be available. This rotation also involves being part of an integrated team that includes psychiatry, psychology, and nursing, as well as interacting with primary care teams. If interns elect they may also choose to complete a 2.5 day competency training to become certified in PCMH. Clinical health psychology with older patients may include interactions with geriatricians, geriatric fellows, nurses, social workers, dietitians, physical therapists, etc. Supervisor(s): Kate Marinchak, PsyD, Alex Gonzales-Harsha, Ph.D. and Christoffer Grant, Ph.D.

**Outpatient Mental Health Rotation (MHC).** Interns will have the opportunity to work with acute and chronic patients exhibiting a full-range of psychiatric diagnoses. Treatment duration may range from short-term crisis intervention to long-term management. Interns will perform initial intake and diagnostic evaluations, triage assessments, and ongoing treatment. Interns will gain experience working with individuals and groups. Those with a particular interests in geriatric mental health will be able to work with older patients. Interns will operate in roles of individual therapist, group leader or co-leader, consultant, and/or case manager. Groups that are part of this rotation include CBT for Anxiety and Depression, Panic Disorder Treatment, Mindfulness Skills, Grief and Loss, LGBT support and Meditation group. In this rotation, interns will function as part of an inter-professional team consisting of psychologists, psychiatrists, social workers, advanced practice registered nurses, and registered nurses. Those working with older patients will interact geriatricians, geriatric fellows, nurses, social workers, dietitians, physical therapists, etc. Supervisor(s): Gary J. Bryson, Psy.D.; Sharon Cooper, Ph.D; Andrew W. Meisler, Ph.D.; Kate Marinchak, PsyD. and Kelly Grover, Ph.D. and Desreen Dudley, PsyD.

**Substance Use Disorders Treatment Program (SUD) Rotation. Substance Use Disorders Treatment Program (SUD) Rotation.** Interns will work veterans diagnosed with an array of substance use disorders, many of whom are dually diagnosed. Interns will learn intake/assessment, individual and group therapy skills, as well as case management and treatment planning. Interns will lead or co-lead a variety of groups in the general outpatient clinic, and within the Intensive Outpatient Program (IOP) and the Harm Reduction (HARC) specialty programs. These groups may include coping skills, motivation enhancement, and mindfulness groups, as well as others. Interns will learn about a variety of substance use treatment interventions including 12-step facilitation, CBT for SUD, harm reduction and medication-assisted treatment. This rotation affords an opportunity to participate and work within a multidisciplinary team approach in intensive substance abuse rehabilitation, learning from a variety of other disciplines. Furthermore, this rotation also provides evaluation, treatment and case management opportunities with

August 20, 2022

individuals with serious dual disorders. Interns will have an opportunity to learn advanced skills of team leadership, program administration and evaluation. Interns with an interest in geriatrics may also be exposed to substance use disorders in older patients. Opportunities for participation in independent research may also be available. Supervisor(s): Howard Steinberg, Ph.D. Kathrynne (Kate) Marinchak, PsyD and Aryeh Herman, PsyD.

**Posttraumatic Stress Disorder (PTSD) Rotation.** This rotation provides the opportunity to gain experience in the assessment and treatment of veterans with posttraumatic stress disorder. Interns will work with veterans who have histories of combat trauma, military sexual trauma, and/or childhood trauma. Interns will provide individual and group outpatient therapy and conduct assessments for veterans seeking services in the clinic. Specific groups are referral-dependent and may not be convened in every rotation. Interns will gain experience in evidence-based treatments for PTSD (Cognitive Processing Therapy and Prolonged Exposure Therapy), as well as state-of-the-art assessment using the Clinician Administered PTSD Scale for DSM-5. There will also be a focus on engaging ambivalent patients in treatment and family involvement. Interns will work as part of an inter-professional treatment team consisting of psychologists, psychiatrists, social workers, marriage and family therapists, advanced practice registered nurses, and registered nurses. Those with an interest in geriatrics may also be exposed to stress disorders in older patients. Supervisor(s): Heather Cochran, PhD.

**Clinical Neuropsychology Rotation.** The Neuropsychology Clinic provides comprehensive neuropsychological assessment services. The Clinic uses a comprehensive but flexible battery culled from a wide variety of neuropsychological instruments in evaluating a broad spectrum of referral questions (e.g., TBI, dementia, movement disorders, stroke). The intern will cultivate skills for consult management, neuropsychological assessment techniques, report writing for case conceptualization, and for providing feedback of testing results to help treatment planning. Interns also participate in the GEMS (Geriatric Primary Care clinic conducting brief cognitive assessments. Furthermore, professional development through the management of an active service, fostering mentoring skills, and supervision of junior level trainees opportunities are also available. Depending on interests, the intern will also have data collection opportunities for research development. This is a demanding rotation, so a minimum of one practicum year of neuropsychological testing experience is required. Supervisor(s): Ann-Marie Raphael, Ph.D.

**VA Minor Rotations:** The VA may be able to offer several minor rotation training experiences. Not all minors are available each year and not all minors will fit with specific major rotations. Minor rotations are up to 1 day a week for between 4 and 6 months. Minor training rotations are NOT mandatory and are offered to enhance breath of training. Minor rotations will need DOT approval and Training Committee coordination. Therefore, minor rotation should be thought of as possible add-ons and not major training experiences that can be guaranteed. Below are some examples of VA based minor rotations, but we may have some flexibility in the Mental Health, Clinical Health Psychology and Substance Use Disorders clinic to carve out other one day training experiences if it does not conflict the your major rotation training elements. Below are some, but not all possible minor rotations.

**Cognitive Processing Therapy (CPT).** This minor rotation may be offered at the VA. The training is not directly provided by Consortium staff, but rather through the VA's national Evidence-Based Training Rollout and is open to all VA mental health clinicians (including interns). However, the Consortium does not have direct influence on the training and therefore cannot guarantee either the availability or the timing of the training. Availability and timing of CPT training is set by the VA Central Office. In the last several years training has been offered locally, in July. The training provides an opportunity to formally learn this specific cognitive behavioral therapy for the treatment of people with PTSD. The training requires participation in a formal two day workshop, weekly consultation calls, and the completion of two full cases (total protocol). Within two weeks of your training (early July) you will be asked to begin participating in weekly phone case consultations for a minimum of one hour per week for a period of 6 months. You must attend at least 75% of the calls. During the consultation calls you are expected to actively discuss your CPT cases. If you select this minor it precludes other minor rotations for at least the

August 20, 2022

first 2/3 of the year and possibly for the entire year depending on your progress through the training.  
Supervisors: Heather Cochran, PhD. and Kelly Grover, Ph.D.

**Smoking Cessation Minor Rotation.** Interns also have the option of participating in a 4-6 month smoking cessation minor. Interns on this rotation will participate in graduated learning, with clinical, administrative, and supervisory activities commensurate with their developing knowledge. Interns will spend 8 hours a week participating in the clinic, conducting initial assessment, follow up behavioral sessions, running a smoking cessation group, providing tiered supervision to our CHP extern, and overseeing a program development project involving interdisciplinary staff and utilizing Motivational Interviewing to engage veterans with active nicotine use who are not currently connected with the clinic. Interns will work with peer specialists, engage in weekly group supervision around MI skills and outreach calls, and manage data. . Supervisor(Kathryne (Kate) Marinchak, PsyD

**Compensation and Pension:** The C&P rotation offers psychology interns the opportunity to conduct forensic evaluations associated with the Department of Veterans Affairs disability claims process. C&P evaluations typically require the psychologist to (1) determine if a veteran currently meets DSM-5 criteria for a claimed mental disorder, (2) document the impact that the diagnosed mental disorder has on the veteran's occupational and social functioning, and (3) provide an expert statement on the relationship between a veteran's claimed mental disorder and his or her military service. In this rotation, interns will perform forensic examinations under the close supervision of licensed psychologists, learn to evaluate evidence from medical records and collateral testimony, and learn to appraise and assimilate scientific evidence to support legal opinions. At the conclusion of this rotation, interns will demonstrate an understanding of the differences between the forensic and clinical approach to examinations, a working knowledge of relevant legal statutes that guide the VA's Compensation and Pension system, and proficiency with differential diagnoses using DSM-5 criteria. Supervisor(s) (Mayumi Gianoli, PhD and Christina Dyer, PsyD)

**Questions regarding VA training experiences should be directed to:**

Gary Bryson, PsyD.  
Psychology Service (116B)  
VA Connecticut Healthcare System, Newington Campus  
555 Willard Avenue  
Newington, CT 06111  
Telephone: (860) 594-6348  
[Gary.bryson@va.gov](mailto:Gary.bryson@va.gov)

## **2. UConn Health (UCH) and The University of Connecticut School of Medicine (UCSoM)**

Starting in the training year of 2019-2020 UConn Health began offering major (4-month) rotations. UCH interns will choose two of the following offerings to create a major rotation. Each of the offerings are designed to provide a 10-16 hours per week training experience..

**UCH Neuropsychology.** The neuropsychology rotation provides training and experience in all aspects of clinical neuropsychology. The rotation provides training in selection and administration of various neuropsychological assessment instruments, interpretation of test results, and development of a neuropsychological report, and provision of feedback to patients and family members. Referrals are drawn from a broad range of medical populations including neurological, substance abuse, and psychiatric patients. Interns gain experience in the areas of differential diagnosis, description of cognitive deficits and strengths, and the use of test data for rehabilitation planning and patient management. Supervisor(s): Kevin Manning, Ph.D.; Beth Springate, Ph.D.; Lisa Holme, Psy.D.; Cutter Lindbergh, Ph.D.

**UCH Outpatient Psychiatry:** The Psychiatry Outpatient clinic at UConn Health serves a wide variety of patients encompassing diverse levels of socioeconomic status, genders and sexual orientations, and

August 20, 2022

psychiatric issues, including mood disorders, psychotic disorders including bipolar disorder, and substance use disorders. Treatment is provided in both individual and group formats. Interns would be expected to accept assignment of a limited number of individually treated patients, providing short term care in a 4 month duration or less. In addition, interns will participate in group treatments supervised by Psychology staff. Interns can expect to provide treatment with CBT, mindfulness based, or supportive psychotherapy for patients with a variety of psychological disorders. In addition, interns have an option of participating in a comprehensive DBT program, which involves attending DBT Consultation Team meeting and co-leading 1-3 DBT Groups per week (Skills, Homework, and Advanced Refresher for Graduates). Opportunities for treating DBT patients with individual therapy may or may not be possible, given that DBT patients enroll for a minimum of 6 months and the rotation is a 4 month duration. Supervisor(s): Jessica Meyer, Ph.D. Site: 10 Talcott.

**UCH Outpatient Psychiatry Addictions Clinic.** The intern will be responsible for carrying a caseload of approximately 8-12 individual clients in the brief psychotherapy clinic, which offers time-limited, evidence-based psychotherapy for clients with treatment goals related to substance use. Treatment goals may be directly focused on substance use (e.g., harm reduction, abstinence, relapse prevention), or on related presenting problems (e.g., trauma/PTSD, mood and anxiety disorders, chronic pain/illness, grief and loss, etc.). The intern will be encouraged to choose at least one manualized, evidence-based treatment to learn and carry out (e.g., CPT, Seeking Safety, CBT for Substance Use, CBT for Chronic Pain, Complicated Grief Treatment), depending on client need. Additional opportunities include: completing intakes and psychotherapy screens, presenting at the multidisciplinary team meeting, coteaching psychiatry resident didactics focused on SUDs, completing SUD assessments and providing reports to referral sources, and co-leading groups in the outpatient or Dual Diagnosis Intensive Outpatient Program. There is an underlying focus throughout the rotation on providing person-centered and recovery-oriented care. Supervisor(s): Cassandra Holinka, PsyD. Site: 10 Talcott.

**UCH Child Psychiatry Rotation.** The University of Connecticut School of Medicine Department of Psychiatry maintains a Child Psychiatry Clinic at its Kane Street offices. The Clinic provides general child/adolescent psychiatric and counseling services to a wide array of clients many of whom have experienced trauma. In addition, there is a specific Child Trauma clinic directed by Carolyn Greene. It provides trauma-focused services, including the TARGET treatment developed by Julian Ford and trauma-focused CBT, as well as family therapy, for children and adolescents who have experienced trauma. Therapy is provided from both clinics Monday through Wednesday afternoons. Attendance at bi-weekly staff meetings on Tuesday afternoons is strongly urged. Other rotation times can be negotiated. There is no fixed experience prerequisite, although some experience conducting therapy with children or adolescents is desirable. The work would include intake assessments, structured PTSD and psychiatric interviewing, individual and family therapy. Additionally, interns may also conduct trauma evaluations for individuals seeking asylum. This is done through a collaboration with UCONN Law School. Research opportunities may be available in the minor rotation. Supervisor(s): Carolyn Greene, Ph.D., Rocio Chang, Psy.D., David FitzGerald, Ph.D., Damion Grasso, PhD, and Julian Ford, Ph.D. Site: Kane Street.

**UCH Maternal Health.** Interns participating in this rotation will have an opportunity to work within one or more programs focused on early intervention, prevention, attachment development, parent-child development, and maternal mental health. Nurturing Families is a primary and secondary prevention program for first time families who deliver at UConn Health. Mind Over Mood is a new program initiative (in partnership with the Office of Early Childhood) that seeks to enhance and expand services for perinatal mental health needs throughout Connecticut. Interns could be involved with providing direct services, including individual, family, and group-level interventions with new mothers and children. Interns could also be involved with systems-level efforts aimed at improving the quality and availability of services for at-risk populations. Interns will be offered participation in current research efforts related to program impact, or develop a research project related to the programs described. Supervisor(s): Karen Steinberg, Ph.D. Site: Kane Street.

August 20, 2022

**UCH minor rotations:**

Like the VA, UCH maybe able offer minor rotation training experiences. Again, not all minor training experiences are available each year (dependent on supervisor availability) and not all minors will fit with specific major rotations. We do not want interns participating in an active UCH major to participate in a minor rotation as the demands of training in three clinics undermines the our goal of breadth of treating. Minor rotations are up to 1 day a week for between 4 and 6 months. Minor training rotations are **not** mandatory and are offered to enhance breath of training, but not at the cost of depth of training. Minor rotations will need DOT approval and Training Committee coordination. Therefore, minor rotations should be thought of as possible add-ons and not major training experiences that can be guaranteed. Below are some examples of UCH based minor rotations. Below are some examples of UCH minor rotations, but we may have some flexibility in the Maternal Health, Child Psychiatry and Neuropsychology areas for a one day training experiences if it does not conflict the your major rotation training elements.

**UCH Outpatient Psychiatry:** The Psychiatry Outpatient clinic at UConn Health serves a wide variety of patients encompassing diverse levels of socioeconomic status, genders and sexual orientations, and psychiatric issues, including mood disorders, psychotic disorders including bipolar disorder, and substance use disorders. Treatment is provided in both individual and group formats. Interns would be expected to accept assignment of a limited number of individually treated patients, providing short term or long term care. In addition, interns will participate in group treatments supervised by Psychology staff. Interns can expect to provide treatment with CBT, mindfulness based, or supportive psychotherapy for patients with a variety of psychological disorders. In addition, interns have an option of participating in a comprehensive DBT program, which involves attending DBT Consultation Team meeting, co-leading 1 DBT Skills Group per week, and treating 1-3 DBT patients with individual therapy.  
Supervisor(s): Jessica Meyer, Ph.D. Site: 10 Talcott.

**UCH Research.** The research minor rotation at UCH is available to any intern who would like to become involved in research. This will typically entail participating in an ongoing research project at UCH. Activities may include data management and coding, data analysis, delivering psychosocial study treatments, patient/participant interviewing or conducting focus groups, and participating in report writing. In some cases the intern may undertake their own research project, though, given the time constraints, such projects must be limited (e.g., survey-based research). Independent projects must be supervised by a UCH faculty member. Interns may also use this minor rotation to conduct dissertation research (e.g., minor data collection or data analysis). Interns working with UCH faculty will be required to report directly to that faculty member, and to have regular meetings to allow monitoring of progress. This minor rotation meets one day per week for 6 months, with a possibility of renewing for another 6 months, depending on the project and the consent of the faculty member supervising the research. Interns who are interested in taking advantage of this minor rotation are advised to contact the researcher faculty member prior to the start of the semester to secure permission and outline responsibilities. Interns may only take advantage of this opportunity if they will be assured of meeting their commitment for clinical hours. Supervisors include (but are not limited to): Julian Ford (Stress and trauma in adults and children); Mark Litt (Intervention development for substance use, chronic pain); Kevin Manning (Cognitive remediation and depression in older adults); Howard Tennen (Daily monitoring of stress and substance use); Julie Wagner (Culturally informed interventions for diabetes prevention and management). Interns seeking research opportunities should contact Dr. Litt to find out what other opportunities may be available.

**Further questions regarding UCHC training experiences should be directed to:**

Mark Litt, Ph.D.  
Division of Behavioral Sciences and Community Health  
UConn Health  
Farmington, CT 06030-3910

August 20, 2022

Telephone: (860) 679-4680  
[litt@nso.uchc.edu](mailto:litt@nso.uchc.edu)

**Long Term psychotherapy cases.** All interns will be assigned 2 or 3 long term cases from the VA Mental Health Clinic at the outset of the year. These cases are separate from rotation cases and have been deemed by clinical staff in need of "long term (up to 1 year)" care. Patients often present with complex issues such as complex PTSD, psychotic spectrum disorders and severe personality disorders. These veterans are often not clinically stable enough to endure transfers at the end of a 14 week rotations. Supervisors: Gary J. Bryson, Psy.D.; Sharon Cooper, Ph.D.; Andrew W. Meisler, Ph.D.; Kate Marinchak, PsyD. and Howard Steinberg, PhD.

## Consortium Didactic Opportunities

Interns' clinical experiences are enriched through a series of required seminars that reflect both the expertise of Consortium faculty and contemporary topics/issues in the clinical practice of psychology. Although the exact seminar selections may vary by year (we use current intern input to create the next year's offerings) many core topics remain year after year. The seminars loosely fall into one of five categories. The basic groupings are: Problem-specific seminars; current research topics in clinical psychology; culture, diversity and professional practice issues; and professional development.

Seminar topics in the past have included

### Problem-Specific Intervention

- Health psychology
- PTSD diagnosis and treatment
- Infertility
- Sexual orientation and gender variance
- Military sexual trauma
- Treating obesity
- Cognitive rehabilitation
- substance abuse assessment
- Co-morbid medical conditions
- CBT for SUD, anxiety & affective disorders

### Issues in the Professional Practice of Psychology

- Listening to the patient
- Practice of clinical psychology
- Military culture & Issues impacting veterans
- Culture in clinical psychology
- Integrative psychotherapy
- Mental health clinic administration
- Home-based care
- Primary care mental health integration
- Integrating theoretical orientations in practice

### Knowledge Base/Current Research Topics

- Basic psychopharmacology
- Forensic evaluation
- Solution focused therapies
- Motivational interviewing
- Developmental psychopathology
- Attachment theory and applications
- Cultural and ethnic issues in treatment
- Evidenced-based treatments in the VA
- Neuropsychology
- Mindfulness
- Chronic pain
- Nicotine dependence and co-morbidity
- Alcoholism treatment matching
- Diabetes treatment and research
- Psychiatric disability assessment and treatment

### Professional Development

- Post-internship planning
- Ethics
- Supervision and Consultation
- Licensure
- Writing treatment plans
- Team leadership



August 20, 2022

Interns may also attend the UCHC Psychiatry Department's weekly Grand Rounds or view them from their computer (either live or via the Grand Rounds library). Interns are also strongly encouraged to attend the VA Connecticut Healthcare System monthly Psychology Colloquiums which serves as an augmentation to the mandatory seminars. Interns may also attend the VA Connecticut Healthcare System monthly Mental Health Educational series of presentations.

## **Suggested Readings**

Intern applicants may consider reviewing the following in advance of applying for internship.

### **The APPIC Match-News E-Mail List**

MATCH-NEWS is a FREE e-mail list provided by APPIC as a service to Match participants. It is VERY STRONGLY recommended that all internship applicants (as well as academic and internship Training Directors) subscribe to this list as early as possible in the process (i.e., subscribe NOW if you plan to apply for internship in the Fall of 2022). MATCH-NEWS is an "announce-only" list, which means that only APPIC can post messages to the list. The volume of e-mail messages will generally be very small, usually ranging from zero to five messages per month. As the Match approaches, the MATCH-NEWS list will be the primary method of communicating important late-breaking news and information about the Match, as well as tips and suggestions about how to make the most of the process. Many applicants from previous years have told us that the messages posted to MATCH-NEWS were extremely helpful to them in navigating the selection process.

NOTE: If you previously signed up for the MATCH-NEWS list, there is no need to do so again.

To subscribe to the MATCH-NEWS list, send a blank e-mail message to the following address:

[subscribe-match-news@lyris.appic.org](mailto:subscribe-match-news@lyris.appic.org)

You will subsequently receive an e-mail message (with the subject line, "Your confirmation needed") that contains instructions for you to follow in order to confirm your subscription. Simply follow the instructions in that message, and you will soon receive a "Welcome" e-mail in response. This "Welcome" e-mail confirms that you are successfully subscribed to the list (please note that you are NOT subscribed to the list until you have received the "Welcome" message).

PLEASE NOTE: If your e-mail program uses "Spam" or "Junk Mail" filtering, it is possible that the confirmation message from the APPIC server will be automatically redirected to your "Junk Mail" folder without your knowledge. If you do not receive a confirmation message in your "In" box, you should check your "Spam" or "Junk Mail" folder to see if the message is there.

See the contact info below if you have difficulty subscribing.

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### **THE INTERN-NETWORK E-MAIL LIST**

APPIC also maintains a separate e-mail list, called INTERN-NETWORK, which is a discussion list for internship applicants. This list is optional for applicants, though many find it useful. Applicants can use this list to discuss various aspects of the selection process or to ask questions about the AAPI, interviews, Match, etc. Since this list can generate considerable discussion at times, and thus considerable e-mail, subscribers may wish to use the list's "Digest" option in order to keep e-mail to a minimum (see [www.appic.org](http://www.appic.org), click on "E-mail Lists," then on "Intern-Network" for more info about the Digest option). To subscribe to the INTERN-NETWORK list, send a blank e-mail message to:

[subscribe-intern-network@lyris.appic.org](mailto:subscribe-intern-network@lyris.appic.org)

August 20, 2022

and follow the confirmation instructions as described above for the MATCH-NEWS list.

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#### MORE INFORMATION

For general information about the APPIC Match, see:

<http://www.appic.org/>

and click on "About the Match" and "Frequently Asked Questions." General information is also available at the matching program web site:

<http://www.natmatch.com/psychint>

by clicking the links in the "Overview" and "Match Process" sections.

For complete information about all of APPIC's e-mail lists, see [www.appic.org](http://www.appic.org) and click on "E-mail Lists."

If you have any questions about these lists or about the APPIC Match in general, you may contact Dr. Greg Keilin at [gkeilin@mail.utexas.edu](mailto:gkeilin@mail.utexas.edu) or (512) 475-6949.

## Facility and Training Resources

Office space, computers, laboratory, and library facilities are available. The UConn Health campus has a large, regionally accredited medical library. Upon orientation to the Internship all interns will be granted electronic access to UConn medical library resources. Additional library facilities, if needed, are available at the University of Hartford, Wesleyan University in Middletown, and at the extensive holdings at Sterling Library and the Medical Library at Yale University in New Haven. Numerous educational programs, special seminars, and workshops, are conducted at many mental health facilities located within an hour's drive from Hartford. Such facilities include the Institute of Living in Hartford; Austen-Riggs Clinic in Stockbridge, Massachusetts; the Yale Psychiatric Institute in New Haven; and the Connecticut Valley Hospital in Middletown. Boston and New York City, with their innumerable professional, educational, and cultural opportunities, can be reached within a couple of hours by train or car.

## Administrative Policies and Procedures

### Benefits

A snapshot of internship benefits can also be found in the Table labeled, "Internship program support information" on page 4 of this document. Four of the admitted interns are paid solely by the VA. One will be paid by UConn Health Department of Psychiatry. In addition to their pay, interns are provided with leave (sick and vacation) during the internship year. At the VA, each type of leave accrues at a rate of 4 hours per two week pay period. Leave at UCH is taken with the consent of the site/rotation director of clinical training. It is important to note that we ask interns not to take more than one week of leave during any single rotation. Additionally, we grant up to 4 professional development days (known as AA days) for such functions as defending dissertations and attending conferences. Unfortunately, due to local VA guidelines these AA days cannot be used for post doc interviews or walking in commencement. Finally, health and life insurance benefits are available to interns.

### Reviews

In facilitating the professional growth of the intern, we strive to maintain a climate in which open, mutual sharing of thoughts and feelings regarding progress remain an integral part of all supervisory

August 20, 2022

relationships. At the end of each four-month training rotation each supervisor makes specific written comments on the intern's performance in the areas of evaluation, intervention, use of supervision, and professional conduct. These reviews provide the basis for a discussion in which the supervisor and intern review the intern's progress, the specific training experiences that may be necessary to enhance professional growth, the supervisory relationship, professional conduct, and to program whatever training experiences seem appropriate. In the unlikely event that an intern fails to attain at least a "Satisfactory" level of performance in any of the areas noted above, the Consortium Training Committee in conjunction with a designated supervisor and the intern will develop a plan to remediate the performance deficiency. The psychology intern is expected to contribute to the ongoing development of the training program. At the end of each rotation, each intern completes an evaluation form assessing the quality of the training experience and supervision received. This information is shared with each supervisor and used by the Consortium Training Committee in planning and program change and is available for review by the APA Commission on Accreditation.

### **Liaison to Graduate Programs**

We are interested in working as closely as possible with faculties of the various graduate psychology programs from which our interns come. We establish a formal training agreement with each intern's academic institution through an official Memorandum of Affiliation. After each evaluation, the Consortium Director forwards a letter to the intern's University Director of Training summarizing the intern's progress toward completion of the internship training program.

### **Assistance and Grievance Procedures**

The Consortium subscribes to the general principles of Alternative Dispute Resolution. Interns address special needs and/or grievances at the lowest level necessary to realize relief or resolution. When an intern has a grievance or need, he/she will first address the issue with the rotation supervisor, progressing to the next higher level (i.e., institutional Director of Training followed by the Training Committee and Consortium Director) until resolution is realized. The intern may request the involvement of a disinterested Consortium faculty member to serve as a mediator at any point in this process. If the intern is unable to realize resolution, she/he can consult with the Human Resources department of the institution housing the rotation regarding institutional procedures as they apply to temporary employees. Interns are advised that temporary employees may have limited rights relative to permanent employees. These policies are completely spelled out in the Consortiums Trainee Handbook which is provided during the orientation in the intern's first week.

### **Termination Procedures**

Should circumstances arise that might warrant termination from the internship, the intern will be informed by the Consortium Director via letter, and requested to appear before the Consortium Director. The letter will describe the behavior in question and the possible interventions and outcomes. Interested parties (e.g., rotation supervisor) and the intern's graduate program Director of Training will be invited to attend. If the latter is unable to attend, he/she will be apprised of the matter before the Consortium Director and of possible interventions and outcomes. The graduate program Director of Training will become an active participant in the proceedings. Every effort will be made to take corrective action (e.g., remediation, counseling) unless the behavior in question is so egregious that termination is warranted without such action. The Consortium Director's decision can be appealed to the full Consortium Training Committee; the Training Committee's decision is final.

## **Requirements for Completion**

The intern must complete the full time internship with an average of "Satisfactory (2.5) or above" on each of the final training rotation's intern competency ratings. The competency based ratings are reflective of the standard elements found in the 2017 APA SOP guidelines.

## **Consortium Training Committee**

August 20, 2022

Consortium Director and VA Director of Training:  
UCHC Director of Training:  
Intern Representative:

Gary Bryson, Psy.D.  
Mark Litt, Ph.D.  
Rotating basis

## Supervising and Training Staff

**BRYSON, Gary J., Psy.D.**, 1997, Long Island University-C.W. Post University. Associate Chief of Psychology, VA Connecticut Healthcare System, Newington Campus, and Associate Professor of Psychology, University of Connecticut Medical School. Interests: treatment and evaluation of psychosis spectrum disorders, cognitive remediation, vocational rehabilitation, rehabilitation outcomes research.

**CHANG-ANGULO, Rocío, Psy.D.**, 2005, University of Hartford. Assistant Professor of Psychiatry, University of Connecticut School of Medicine. Clinical interests: the intersection among domestic violence, trauma and mental health, treatment of traumatic stress disorders and problems of emotion regulation with children, adolescents, and families from different cultural backgrounds. Research interests: the role of empowerment in emotion regulation; the role of positive psychology in developmental and complex trauma; and secondary trauma in domestic violence advocates.

**COOPER, Sharon, Ph.D.**, 2006, New York University. Staff Psychologist, VA Connecticut Healthcare System, Newington Campus, Assistant Professor of Psychiatry, University of Connecticut School of Medicine. Interests: Internal Family Systems, Psychodynamic psychotherapy, Mind-body medicine, Complementary and Integrative Health, VA Whole Health initiative.

**COCHRAN, Heather M.**, Ph.D. 2006, Central Michigan University. Staff Psychologist, VA Connecticut Healthcare System, Newington Campus. Interests: Cognitive Behavioral Therapies for PTSD and Anxiety Disorders, Substance Use Disorders and Concurrent clinical issues, Relationships between factors of individual differences and retention/attrition for Empirically Supported Psychotherapies, Compassion Fatigue and Resilience in Mental health providers.

**DUDLEY, Desreen N.** Psy.D. 2007, University of Hartford. Staff Psychologist, VA Connecticut Healthcare System, Newington Campus. Interests: Cognitive Behavioral Therapies and Relational therapies for anxiety, depression, mood and psychotic disorders, personality disorders, multicultural issues, couples therapy.

**FITZGERALD, David, Ph.D.**, 1995, University of Notre Dame. Assistant Professor of Psychiatry, University of Connecticut School of Medicine. Interests: posttraumatic stress disorder, child Development and rehabilitation.

**Ford, Julian D. Ph.D.** 1977 SUNY at Stony Brook. Professor of Psychiatry, University of Connecticut School of Medicine. Director, Center for the Treatment of Developmental Trauma Disorders. Interests: complex PTSD, developmental trauma, psychotherapy research, family and couples therapy, psychometric measure development, secondary traumatic stress, frontline healthcare personnel.

**GIANOLI, Mayumi (MAY) Ph.D.**, 2010, Washington University in St. Louis. Director Mental Health Compensation & Pension, VA Connecticut Healthcare System and Assistant Professor, Department of Psychiatry, Yale School of Medicine and UConn School of Medicine. Interests: disability evaluation, assessment, functional disability, PTSD, mental disorders.

**GONZALES-HARSHA, Alex, PsyD.**, 2016, Rutgers University. Staff Psychologist, VA Connecticut Healthcare System, Newington Campus. Interests: Chronic pain, health psychology, mindfulness and

August 20, 2022

acceptance based therapies, integrative health, workplace wellness, assessment of organizational culture.

**GRANT, Christoffer, Ph.D.**, 2011, University at Albany – State University of New York. Assistant Professor of Psychiatry at the University of Connecticut. Managing Director of PCMHI (Primary Care Mental Health Integration) for VISN1. Interests: Integrated primary care psychology, chronic pain, insomnia, mindfulness, weight management, health behavior change.

**GRASSO, Damion J., Ph.D.**, 2011, University of Delaware. Associate Professor, University of Connecticut School of Medicine, Departments of Psychiatry (primary) and Pediatrics (secondary). Interests: psychological trauma, assessment and treatment of trauma-related disorders, biobehavioral mechanisms of developmental psychopathology following adversity and trauma.

**GREENE, Carolyn A., Ph.D.**, 2011, University of Massachusetts Boston. Assistant Professor of Psychiatry, University of Connecticut School of Medicine. Clinical interests: treatment of traumatic stress disorders and problems of emotion regulation with children, adolescents, and families. Research interests: intergenerational effects of trauma.

**GROVER PANAS, Kelly, Ph.D.**, 2011, University of Houston. Staff Psychologist, VA Connecticut Healthcare System, Newington Campus, and Assistant Professor, Department of Psychiatry UConn School of Medicine. Interests: Cognitive Behavioral Therapy (CBT), mindfulness, treatment of panic disorder, CBT for chronic pain, Acceptance and Commitment Therapy for depression, Cognitive Processing Therapy for PTSD, anxiety and mood disorders, suicide nomenclature.

**HERMAN, Aryeh I., Psy.D., M.S.C.P.** 2008 University of Hartford. Program Manager for Substance Use Disorder Intensive Outpatient program. Interests: Genetic, genomic, epigenetic, and epigenomic risk factors for substance use disorders, contingency management, impact of childhood trauma and adverse life events on drug and alcohol consumptive behavior, effect of smartphone and social media use on mental health outcomes.

**HOLME, Lisa, Psy.D.**, 2003 University of Hartford, Assistant Professor/Clinical, Psychiatry, University of Connecticut School of Medicine. Clinical interests: neuropsychological assessment of adults with psychiatric and neurological disorders.

**HOLINKA, Cassandra J., Psy.D.**, 2016, University of Hartford. Assistant Professor of Psychiatry, UCONN Health. Interests: treatment and evaluation of substance use disorders and trauma, cognitive behavior therapy and mindfulness, gender and other multicultural issues related to mental health treatment and workplace experiences.

**LINDBERGH, Cutter A., Ph.D.**, 2018, University of Georgia. Assistant Professor of Psychiatry, University of Connecticut School of Medicine. Clinical interests: neuropsychological assessment of patients with psychiatric, neurological, and medical conditions impacting cognitive functioning. Research interests: improving early detection and intervention strategies for unhealthy cognitive aging and age-related neurodegenerative diseases.

**LITT, Mark D., Ph.D.**, 1986, Yale University. Professor, Division of Behavioral Sciences and Community Health, University of Connecticut School of Dental Medicine, Department of Psychiatry, and Department of Obstetrics and Gynecology, University of Connecticut School of Medicine. Cognitive-behavioral assessment and therapy, general health psychology, pain and coping with stressful medical procedures, substance abuse research, research in health behaviors, clinical trial design and data analysis.

**MANNING, Kevin, Ph.D.**, 2012 Drexel University, Assistant Professor of Psychiatry, University of Connecticut School of Medicine. Clinical interests: neuropsychological assessment in adults and

August 20, 2022

adolescents with psychiatric and neurological disorders. Research interests: association between functional and cognitive performance in aging, cognitive trajectories in older adults with psychiatric illness.

**MARINCHAK, Kathryne, (Kate) PsyD.**, 2011 Rutgers University Graduate School of Applied and Professional Psychology. Clinical interests: Evidence-based interventions for substance use disorders, harm reduction, motivation enhancement, brief psychodynamic psychotherapy, attachment theory. Research interests: Wellness and prevention program development, harm reduction intervention and treatment engagement, occupational engagement as a mitigating factor in veteran adjustment and mood.

**MEISLER, Andrew W., Ph.D.**, 1992, Syracuse University. Staff psychologist, VA Connecticut Healthcare System, Assistant Professor of Psychiatry, University of Connecticut School of Medicine. Interests: posttraumatic stress disorder, disability evaluation and forensic psychology, dual diagnosis assessment and intervention, cognitive behavioral therapy.

**MEYER, Jessica, R., Ph.D.**, 2007, University of Virginia. Associate Professor of Psychology, University of Connecticut Medical School. Interests: Dialectical Behavior Therapy, Cognitive Behavioral Therapy.

**Raphail, Ann-Marie, Ph.D.**, 2020, Drexel University. Staff Psychologist, VA Connecticut Healthcare System, Newington Campus. Interests: neuropsychological assessment, neurological populations (stroke, epilepsy, movement disorders, neurodegenerative disorders, etc.), cognitive remediation, combining technology and traditional neuropsychological assessment in cognitive research.

**SPRINGATE, Beth, Ph.D.**, 2011, University of Connecticut. Assistant Professor of Psychiatry, University of Connecticut School of Medicine. Clinical interests: neuropsychological assessment in adults with neurological, medical, and psychiatric conditions. Research interests: cognitive changes associated with normal and pathological aging, as well as the impact of these symptoms on the larger family system with a particular focus on caregiver burden.

**STEINBERG, Howard, Ph.D.**, 2003, University of South Florida. Director, Mental Health Firm and Director, Substance Use Disorders Clinic, VA Connecticut Healthcare System, Newington Campus. Associate Professor of Clinical Psychiatry, Yale University School of Medicine. Interests: Addiction treatment approaches, dual diagnosis, cognitive behavioral therapy.

**STEINBERG-GALLUCCI, Karen L., Ph.D.**, 1994, State University of New York at Buffalo. Associate Professor of Psychiatry, University of Connecticut School of Medicine. Interests: attachment theory, substance abuse treatment and research, psychotherapy process research, stress management, legal/ethical issues in clinical practice.

## **Didactic Training Staff**

**BARCELOS, Nicole M., Psy.D.**, 2014, University of Hartford. Clinical Neuropsychologist, Easterseals Capital Region & Eastern Connecticut, and Associate Neuropsychologist, Northeastern Neuropsychology. Interests: Neuropsychological consultation and assessment of adults and older adults/geriatrics, aging and dementia research.

**COONEY, Judith, L., Ph.D.**, 1981, University of Georgia. Associate Professor of Psychiatry, University of Connecticut School of Medicine, Neag Comprehensive Cancer Center, UCONN Health. Clinical interests: health psychology, coping with cancer, health promotion for cancer patients, nicotine/tobacco treatment, behavioral weight management, alcohol harm reduction, CBT-Insomnia, cancer survivorship, substance use disorders; Research Interests: novel nicotine/tobacco treatments in hard to treat smokers, alcohol-tobacco interactions.

August 20, 2022

**COREY, Kimberly, Ph.D.**, 2006, University of Cincinnati. Staff Psychologist, VA Connecticut Healthcare System, Clinical Resource Hub. Interests: gero-psychology, behavioral medicine and health psychology, Whole Health and patient-centered care, grief and end of life care, Internal Family Systems.

**KABELA-CORMIER, Elise, Ph.D.**, 1987 SUNY at Albany. Research Associate II. Division of Behavioral Sciences and Community Health, and Department of Psychiatry, UConn Health. Interests: treatment for alcohol, marijuana, and gambling problems; affective disorders; anxiety disorders; CBT for adults in partial hospital and outpatient therapy settings.

**KAMATH, Jayesh, M.D.**, 1994, St Petersburg Pavlov Medical University, Russia, Ph.D., University of Arizona. Associate Professor of Psychiatry and Immunology & Medical director, Mood & Anxiety Program, University of Connecticut School of Medicine. Interests- Psycho-oncology, interactions between the psycho-neuro-endocrine-immunological systems, basic/clinical aspects of the psychopharmacological management of psychiatric disorders

**KONERU, Vamsi K., Ph.D.**, 2009, University of Miami. Clinical Psychologist in private practice at Koneru Psychotherapy, LLC, Certified Mindfulness Teacher and Assistant Professor, University of Connecticut School of Medicine. Interests: Trauma, mindfulness, neuroscience and intersections of mental health and the carceral system.

**MARTINO, Steve, Ph.D.** 1990, DePaul University. Chief of Psychology VA Connecticut Healthcare System and Professor of Psychiatry, Yale School of Medicine. Interests include: Motivational interviewing, Screening, Brief Intervention, and Referral to Treatment (SBIRT), psychotherapy development, formative evaluation, implementation science.

**RASH, Carla, Ph.D.**, 2007, Louisiana State University. Associate Professor, Department of Medicine, Calhoun Cardiovascular Center, Division of Behavioral Health UCH. Interests: Treatment outcome and relapse in addictions; Contingency management; Smoking cessation; Pathological gambling.

**TENNEN, Howard, Ph.D.**, 1976, University of Massachusetts. Professor of Public Health Sciences and of Psychiatry, University of Connecticut School of Medicine. Interests: psychoanalytic psychotherapy, stress and coping.

**VANDERPLOEG, Purvi Ph.D.**, 2005, Bowling Green State University. Psychologist, Private Practice. Assistant Professor of Psychiatry, University of Connecticut School of Medicine. Clinical Interests: Health Psychology, Cognitive-Behavioral Therapy, treatment of chronic pain management, anxiety disorders, depressive disorders and adjustment disorders.

**WAGNER, Julie A., Ph.D.**, 2000, University of Rhode Island. Professor, Division of Behavioral Sciences and Community Health, UConn Health. Interests: health psychology, diabetes, depression, cardiovascular disease, health behavior change, quality of life

## Local Information

The Consortium institutions are located in the Hartford suburbs, a fifteen-minute drive from one to the other. The Greater Hartford metropolitan area, with a population of some 800,000 is rich in work and educational opportunities, housing choices, shopping diversity, historical interests, cultural and leisure activities. The ambiance varies from the modern skyscraper of the downtown financial and business complex to the colonial New England atmosphere of the Old Statehouse and suburban town greens. In Hartford itself are the Wadsworth Athenaeum, the oldest art museum in the country, the Horace Bushnell

August 20, 2022

Memorial Hall, offering local and out of town ballet, opera and symphony performances, and the Hartford Stage Company, a recognized regional repertory theater.

Greater Hartford is forty-five minutes from the cultural and educational activities in the Yale-New Haven area and the beautiful campus of the University of Connecticut, home of the Huskies perennial powerhouse in both Men's and Women's basketball.

The greater Hartford area is also less than a two-hour drive from either Boston or New York City. It is, in fact, no more than six hours from any place between Washington, D.C. and Montreal.

## **Directions to Consortium Campuses**

### **To the VA:**

From Interstate 84 West (from Hartford):

Take Exit 39A on to Route 9 South.

Exit at Exit 29 and turn left at end of ramp onto Ella Grasso Blvd.

Turn right at first stoplight onto South Fenn Road.

Turn left at second stoplight onto Cedar Street/Route 175.

Turn left at CITGO Station (on your left) onto Alumni Road.

Continue on Alumni Road to the stop sign.

Bear right and continue to the Visiting Parking at the top of the rise and in front of the main entrance of the hospital. Park and proceed to Psychology Service, 3<sup>rd</sup> floor, Building 2C.

### **To UCH from the VA:**

Take the Alumni Road from the VA campus and go to stop sign at Cedar St./Route 175 (a CITGO Station is on your right).

Take a right onto Cedar St./Route.

Go to the second light, and take a right onto South Fenn Road. Get in the left lane.

Go to the second light and take a left onto Ella Grasso Blvd.

Take an immediate right onto Route 9 North.

Go to the end of Route 9.

At the end, when the road splits, bear left onto Route 84 West. Do not merge with the traffic. Take the first exit (Exit 39) for Route 4 in Farmington.

At the end of the long exit ramp, at a light, go right onto Route 4 East.

Go about one mile, and two lights, then turn right into the main UCHC entrance.

After entering the UCHC campus, continue past the blinking light, then bear left at the fork.

At the second stop sign, continue straight up the hill. Stop at the guard booth in front of the main hospital entrance, and you will be directed to parking.